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PLEASE HELP  
S.P.A.S.T.I.C.S.

THE SPASTICS SOCIETY

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# SPASTICS NEWS



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Editor: Eve Renshaw

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*Miss Davey, same address*

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*Mrs. A. Mansel-Dyer, St. John House, 60 Staplegrove Road, Taunton, Somerset. Tel.: 81678*

Jersey Spastic Society

Northern Ireland Council for Orthopaedic Development (Inc.)

# Where are We Now?

*In this article, condensed from an address given to some of the staff from the Society's Schools & Centres, Dr. Stevens, Director of the Society looks at its place in the community today.*

IT is a long slow business, for some, emerging into life. Spastic people, especially the young people now entering their grown-up responsible lives, with few precedents of attainment through the new opportunities, are cautious—perhaps properly cautious—and understandably, a bit afraid.

## Spastics in Jobs

There will always be many things that spastic people cannot do; not many things they can do as well as unhandicapped people, and only a few things they can do better. Nevertheless, although the spastic equivalent of the four-minute mile has yet to be run, some young spastic workers have shown that as employees they can be as good as many of the unhandicapped—and sometimes better. Work means more to them. The endless white week-end is not for them; not now. They have discovered the colour and movement of a working week and they are not going to lose it through negligence. They have shown too, as people needing and accepting help, that they are necessary to the rest of us who need and accept the opportunity of meeting their needs.

The spastic population, as most of us have met it, is a youngish one. They make all the mistakes of youth—as we did or are doing—over-optimism for example, or unrealistic ambition. Is it for us to complain (as I have sometimes heard people complain) of the difficult problem of the intelligent badly-handicapped spastic young school leaver who does not understand that his brain and his ambition will not take him everywhere—perhaps not even anywhere? Which of us did not, on leaving school, have a secret feeling that we were going to achieve some fantastic success, to lead an army of heroes (or of revolutionaries, if such was our temperament) or find the cure for cancer—in some way to win the world? And has not our small army of spastic heroes earned its title—through courage and endurance at a stand, if not for carrying positions?

## Welcomed by the Community

It is not the Government, but the people of England, who, by thought, by understanding, by help and by generosity, have turned into the beginning of a success story the problem which faced and inspired the Spastics Society. Ordinary generous people have done far more for spastics than could be bought for money. Perhaps it is because ordinary people understand better the common humanity they share with others in the community. In the ordinary life of free countries the family is the first essential unit; but between the family and the identifiable units represented by government in some form or other—and encompassing all of them—is “the community”. And all the community amounts to is people—living, loving,

ordinary, odd, unorganised, unrecognisable, essentially our brothers and sisters, husbands and wives, relations and friends, and us.

Those of us who make up the Spastics Society—handicapped and unhandicapped—have come to where we are in several ways—as debtors and creditors, as needed and needing, as we and they—because it is important to see that, whatever place we have in the community, we are the community.

## Maturity of Co-operation

In the Society's early days, it gave little thought to its place in the community. The Society was too much aware of the immediate problems; it had to establish and to begin to tackle, with inadequate tools, the enormous tasks left undone for too long. Many people with whom the Society had to live—doctors, education officers, other charities—found the Society an uncomfortable and sometimes rather brash companion. We knew that charity begins at home and sometimes forgot that it must also go abroad. We had all the defects of our immaturity. We were outside the community.

The position is now changed. In little over ten years, we have succeeded in achieving more than other comparable bodies have managed in half a century. Local authorities, Ministries, doctors and other charities find us now mature, well-organised, professionally orientated without loss of common humanity, ready and willing to work with them, a body to whom many turn for responsible advice and even leadership. This is the Society's position now and it is satisfactory—and indeed we can be very proud of it, provided that we maintain momentum, and **provided that, in spite of necessarily professional orientation, we can maintain the forthright, human, essentially “lay” approach to social problems.**

When the Welfare State was established after the last war, many thought that private charities would in the long run become unnecessary. Some more thoughtful people even feared that logically speaking the opportunities for the exercise of the private virtue of charity might suffer such diminution as would be a threat to our moral well-being and our personal and social peace. This has not proved to be the case; the need for charity and for specialised forms of charity is as great as it ever was, even if it is different. Official bodies will have their hands full enough for decades with massive official schemes—schools, hospitals, houses, roads—and they will not be able to afford what would, in terms of bald economics, be a disproportionate effort for the handicapped.

\* \* \* \*

It is good to be doing this sort of work; it is good for us and good for the community. It is good because even when the emotions are dried up and exhausted (as they

must sometimes be since it is often very exacting work) it is possible to look at it clearly, critically and coldly and to measure its worth and to make a calm intellectual choice to continue at it and to be satisfied that it is the right choice. It is possible for each one of you to know that the Society is your own work, and to know, as you should know, that a chance observation by a young member of the staff at Irton or Craig-y-Parc or a Local Group centre may be important, even very important, for the centre you work in, for spastics in general and the work of the Society, and perhaps for handicapped people all over the world. Distance from London should not persuade you to feel out on a limb—you are not; you are the limbs; and you know better than most that a body without useful limbs cannot get very far and will achieve little if it can do no more than talk—little more than hot air. You will, I think, be happier and more fruitfully engaged in this work the more you understand what the other limbs are up to, what the body is doing—what's going on, if

you like, inside its head—and what the rest of the world is doing. That is one of the objects of the SPASTICS NEWS and the SPASTICS QUARTERLY, of conferences and meetings and open days, and of courses and seminars.

#### Qualifications need be few . . .

What sort of people are there in our part of the community? What sort of people do we need? Dr. Henry Miller of the Newcastle Medical School once said that the only qualities required of a medical student are high intelligence, good character, pleasing personality, robust mental health, indomitable spirit, boundless physical energy, a sense of humour, and keen ambition disciplined by a lively social conscience; he must also be happy. Dr. Miller added, "Of course, such qualities would also fit the applicant to take up the post of Prime Minister or Archbishop of Canterbury . . ." I should like to think that in the Society we have greater success than that medical school. It sometimes looks like it.

# Conference of Spastics

**Gothenburg, Sweden, August 5-15th, 1964**

**by J. Loggie Wood**

THIS was the first ever International Conference in which spastics took an active part, not only in the debates and discussions which followed the talks and lectures, but actually addressed the Conference themselves, reading papers which they had carefully, if sometimes hastily, prepared.

The actual Conference was opened by an address of welcome from the Pastor of the C.-P. school in which the Conference took place. This was followed by the first part of a talk given by Mrs. Ingrid Lundbäck, a social worker from Stockholm, entitled "To live is to dare". This, it turned out, was to become the theme of the Conference, as speaker followed speaker on topics ranging from the general public's attitude towards the c.-p. to the siting of residential centres and the age-old Adam and Eve problem. Most of the talks lasted 30-45 minutes, but the discussions often lasted into the early hours over pints of strong black coffee and piles of cigarette ash and empty packets.

Yet it was not all work; we had a day in a camp for handicapped Scouts and Guides, where many of us went for a swim in the lake. We were entertained to tea and a film show in the British Consulate. The townspeople of Gothenburg invited us to lunch at the "Börsen", where we followed in the footsteps of the famous, as Kruschev and the late President Kennedy who were entertained there on their respective visits to Gothenburg. The nearby town of Mölndal also entertained us to coffee in their beautiful castle.

There were trips to private homes, to the fun-fair, Liseberg (where yours truly nearly lost his teeth on the scenic railway); midnight trips round the town and early morning visits to the Fish Harbour. And, of course, there

were concentrated souvenir hunts round the big stores, where we were given V.I.P. treatment, including soft drinks and cakes "on the house", guides to the various departments, and a gift for each of us.

The general arrangements for the Conference were excellent, and themselves a great tribute to the organisers. Most of the helpers were Senior Scouts and Guides, and all gave their services voluntarily, either giving up ten days of their holiday period or taking time off work without pay.

It is almost impossible to sum up the results of this Conference, as we covered so many—perhaps too many—problems affecting the c.-p. in particular and the disabled in general, but we did get a definition for that problem, the "normal" person: someone whose handicaps are invisible.

So any conclusions of which I write must be entirely personal, and the thing which struck me most forcibly was the self-confidence of the Scandinavian c.-p.'s, and their ability to talk, on level terms—that is, without embarrassment—with a total stranger, far more than I have noticed with c.-p.'s generally in this country, and I think it is because they are less tied, emotionally and otherwise, to their parents than we are, though it has not always been so, in Denmark at any rate. Per Sylvest, ex-chairman of the Copenhagen Spastics' Club, in an article entitled "Grown-up Spastics grow up", says of the early days of the Club, "They (the spastics) were simply brought up to be passive, indeed, anxious spectators of life. And they lacked experience". Today, all the officers of the Copenhagen Spastics' Club are c.-p.'s.

I should like to see adult spastics in this country giving up their roles of passive spectatorship where the local groups are concerned. When that day comes, maybe we can play host to an International C.-P. Conference, and return the kindness shown to us by Sweden.



*Sir Harry Pilkington cuts the ribbon and opens the Holiday Home, watched by the Lord Bishop of Warrington; Dr. R. A. Yorke, Chairman of the Management Committee, Mr. G. Jehan, the Mayor and Deputy Mayor of Southport and their ladies*

*(Photograph: Courtesy Southport Visiter)*

THE Southport Holiday Home, Ellerslie Court, is a friendly, welcoming place, like most northern centres. At its official opening by Sir Harry Pilkington on 14th August, a very large crowd of people crammed happily through its pleasant rooms and wide stairways. Mrs. Solomon, President of the Southport, Formby & District Spastics Society, called the home "a labour of love", and so it felt.

Sir Harry said that while most people needed an occasional holiday, spastic people needed more, since many spastics knew little of the change, variety and refreshment most of us knew in our jobs. Southport, he said, had its own special gift to holiday makers: it was a place where people would like to come to get a completely fresh look and fresh feel of the world.

Sir Harry congratulated the Southport Society on "its vision, its work, and its determination to do what it is doing in just this way. This is a holiday home."

Mr. George Jehan, Chairman of the Local Centres Committee of the Spastics Society, proposed the vote of thanks to Sir Harry Pilkington. Mr. Jehan said that Ellerslie Court was "more than a Group activity, because it is an outward-looking venture which will benefit the whole of the North-West".

Mr. Jehan said the pattern of the Society's work was well illustrated by its activities in north-west England. First came the Local Group Centres (17 in the area), providing services from treatment, education and work to holidays, occupational therapy and child care. Then came Regional activities, such as the Family Help Unit soon to

be started in Manchester on the pattern of the Society's first such Unit, now filling a great need in the Nottingham area.

Finally, national activity undertaken by the parent Society from London: this was represented by the first engineering training centre in the north, due to open in Lancaster within two years, and by Daresbury Hall, a national residential centre.

Alderman P. R. Switzer, Mayor of Southport, personified the town's special talent for a sort of delighted kindness when he welcomed the new project. "We are thrilled" he said, "to help an organisation such as yours, and to welcome a place which will help to keep family life together by taking and easing strain."

The Right Rev. Laurence A. Brown, Lord Bishop of Warrington, blessed the Centre.



*(Photograph: Courtesy Southport Visiter)*

*Among the many donations to the new Holiday Home was this magnificent playroom, called the Lion's Den, donated and stocked with toys by the Lion's Club of Southport at a cost of £1,450*

## Southport Holiday Home

**Opened by  
Sir Harry  
Pilkington**

# Tax Exemption For Disabled Drivers

DISABLED persons who qualify for state-aided personal transport and who receive a grant towards the cost of adapting the controls of their own private cars, will no longer have to pay licence duty on these vehicles after 1st September, 1964. This will only apply if the vehicles are registered in their names and are used by themselves or for their purposes.

This concession, which was announced by the Chancellor of the Exchequer in his Budget Speech, is given effect to by the Road Vehicles (Registration and Licensing) Regulations, 1964, made on 6th August.

A disabled person who is qualified for the grant but who has not obtained one because he bought a vehicle with the controls already adapted, or because the Health Department had already made a grant in respect of another vehicle within the previous five years, is also entitled to this licensing concession.

To obtain exemption from licence duty an application must be made to the local licensing authority on form RF 1/4, available at all motor taxation offices.

In addition to other documents which need to be produced—i.e. certificates of insurance against third-party risks, roadworthiness test certificates depending on the age of the vehicle—the application must be accompanied by a certificate from one of the Health Departments certifying that the disabled person has obtained a conversion grant, or that his disability is of a kind which qualifies for one.

The certificate of exemption from licence duty will be valid only for the vehicle in respect of which it is issued.

It will be known as Form MHS 330 and will require renewal every five years.

An "exempt" licence disc will be issued and must be displayed on the vehicle. These discs will be valid for twelve months and must be renewed on expiry as in the case of an ordinary licence.

Health Department Certificates will be issued by the Ministry of Health or the Scottish Home and Health Department. Requests for the certificates should be made through the manager of the nearest Artificial Limb and Appliance Centre.

A grant towards the cost of modifying the controls of a privately owned vehicle is made by the Health Departments only as an alternative to the State provision of a powered vehicle. Certificates necessary for the licence concession can therefore be obtained only by disabled drivers who have been recommended by a hospital consultant, and accepted by the Health Department, as being eligible for personal transport.

If a disabled person who is already qualified for the grant, has a current licence he may claim back the duty for any complete months the licence still has to run on 1st September, 1964. Application forms for this purpose (Form RF 470) can also be obtained from local taxation offices. Repayment can be made only up to one year after the licence has expired.

Persons who qualify for a Health Department certificate after 1st September, 1964, will also be entitled to repayment of duty on licences current at the date they qualify.

Explanatory leaflets are available at motor tax offices.

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A PRE-WAR Soviet politician, Maxim Litvinov, made the celebrated remark "peace is indivisible". By this he meant that world peace was a totality from which one could not subtract one small part without destroying the whole. This we know to be substantially untrue and that the reverse is the case; one of the prices of world peace is the tolerance of petty peripheral warfare which must be contained if the world at large is to remain at peace. What then of the concept that handicap is indivisible? Is it viable and useful? One would think so if one differentiates between disability and handicap. Disabilities may differ greatly, one from another, both as regards nature and degree. Some are not handicapping; short sightedness may be remedied by the wearing of spectacles; diabetes can be controlled by diet or drugs, other disabilities such as mild mental sub-normality invariably cause grave handicap in highly developed societies but may go almost unnoticed in primitive societies.

Some of the dictionary definitions of handicap are illuminating; "the race or contest in which competitors are equalised at the start", "differences in weight carried", "extra weight imposed to equalise competitors in a race", it seems that there is in the very meaning of the word an assumption of basic human equality as if we were all

children of five years of age and upwards who were unsuited, by reason of mental or physical defect or epilepsy, for education in ordinary schools, and to provide, for these and for blind and deaf children, education in special schools. In 1944 the Education Act enlarged the L.E.A.'s responsibility to cover all forms of disability, lowered the age of ascertainment to two years and gave to parents the right to demand it. Special education could be given wherever it was thought desirable, in an ordinary school, special school, clinic, hospital or home. Various categories of handicap were defined and those now used are:—

The blind	The epileptic
The partially sighted	The physically handicapped
The deaf	Children with speech defects
The partially hearing	The maladjusted
The delicate	The educationally sub-normal.

Educationally sub-normal children are those of very limited ability but nevertheless capable of benefiting from education.

#### **The Dividing Line**

One class of child excluded from these categories is the mentally defective child; that is to say those considered to be ineducable. These are the responsibility not of the Ministry of Education but of the Ministry of Health. At the time of the 1944 Act it must have seemed a wise decision to make this separation because education authorities were on the whole less attuned to the problems of those who found it difficult to learn and more attuned to organising the teaching of those who were teachable, and at that time could hardly be expected to devote much thought or treasure to the ineducable; this dividing line has since become less defensible partly because more is known about the nature of mental defect and of the hidden potential of defectives and also because educationalists

# **IS HANDICAP INDIVISIBLE?**

handicapped in some degree, as in deed we are. Many of us are, for example, minimally brain damaged, some from genetic causes others by biochemical factors, arterio sclerosis or alcohol and as we grow older we tend to lose more neurones from our brain than are replaced by natural processes. Few of us are without bodily blemish and because of these "weightings" very few of us function at our full capacity. It is perhaps useful to think of handicap as a frame containing all the elements of human bodily efficiency, for example, sight, hearing, intelligence, general physical health and mental health. One can visualise a person with poor hearing, high intelligence, poor general physical health and average mental health, in other words a person of very mixed ability, and, many of us are of very mixed physical and mental capacity. The handicapped often have even greater disparities, a good mind may be imprisoned in a deaf, partially sighted and grossly handicapped body, a person of very low intelligence may be otherwise without major blemish. Let us then think of ourselves, not as being apart from the handicapped but as sharing much with them.

#### **Special Education Categories**

Very great advances have been made during the last 20 years in caring for the handicapped, particularly in the field of education. Before 1944 the local Education Authorities' responsibility was limited to ascertaining those

*by J. A. Loring*

**Assistant Director, Services to Spastics**

have become more interested in the learning problems of the "ineducable", many of which have a direct bearing on ordinary teaching and learning difficulties.

This dividing line between the educable and the ineducable is one which bears with particular severity on the cerebrally palsied many of whom are found, by ordinary school service psychologists and school medical officers, difficult to test for intelligence, and many of whom are retarded because of lack of sensory experience due to serious handicap. The spastic child may not be able to crawl across the kitchen floor and pull the cat's tail and be scratched and perhaps slapped by its mother for disobeying the injunction to leave the cat alone. He touches, and in some cases, sees fewer things, and may not learn their names. His vocabulary is smaller and his power to communicate with others all the poorer. Testing by psychologists with special experience of cerebrally palsied children is often necessary if his true potential is to be assessed. The work of the Spastic Society in the field of education

may well prove to be a major contribution to the well-being of all handicapped children since the spastic child is so often, alas, a veritable mosaic of defect—hearing, sight and movement—and even elementary sorting-out processes may be faulty. Cerebral palsy often results in multiple defect, although mercifully this is not true of many individual cases. However the fact remains that the spastic child may appear in any one and may be qualified indeed to appear in several of the Ministry of Education categories I have already mentioned.

In most of the categories Special School accommodation is now sufficient to meet the demand, or nearly so, but there is one important exception—the educationally sub-normal of whom there are 10,000 on the Ministry's waiting lists. This shortage of places bears particularly hard on those cerebrally palsied children who are educably but are nevertheless in the E.S.N. range, because many of these are multiply handicapped and by no means all special schools can provide the facilities that they require. Whilst the proportion of cerebrally palsied among the 10,000 E.S.N. who were in January, 1963, waiting for admission to school was small, the degree of additional handicap makes their plight and that of their parents particularly heart-rending. This would appear to be a fiscal problem: it is certainly not one that arises from a lack of awareness and know-how upon the part of the Depart-

ment of Education and Science, the work of whose officials in this field is of a very high order.

#### The Ineducable Child

The position of the ineducable or severely sub-normal child is less satisfactory. Those who live in hospitals often endure appalling overcrowding but in many cases enjoy devoted care by over-worked staff. For those who live at home and who are able to benefit from training there is a great shortage of special Training Centres. In fact the majority of these Centres enjoy only a sort of ghostly existence in local government plans. The Society's local day Centres and work Centres have made a major contribution in this field, and at Meldreth we shall provide 120 residential places for severely sub-normal but trainable spastics. This will be a major advance, and one expects that much of the work done there will be original and lead to further developments in training techniques.

What of the other handicaps? Each deserves an article in its own right and one would hope that readers of the SPASTICS NEWS will become sufficiently interested in the problems posed by other handicaps to want to read about them in the future. If we have a true interest in spastics it probably derives from a true interest in human beings, and there is no such thing as handicap, there are only handicapped human beings.

## Front Cover Story

### SPASTIC SWIMS CHANNEL

**I**N his leading article in this month's issue, Dr. Stevens says, "the spastic equivalent of the four-minute mile has yet to be run."

But it has been now. John Starrett, a 39-year-old spastic American from Massachusetts, has swum the English Channel from Cap Griz Nez to Dover in 12 hours 45 minutes, and our photograph shows him at his Dover hotel after his triumph. For Mr. Starrett, it was the proudest day of his life. "I hope my success will encourage thousands who have handicaps", he said.

Mr. Starrett, who wore calipers on both legs until he was seven, still walks with a stick. He took up swimming to help overcome his disability. "Instead of kicking my legs up and down with them side by side, I have to cross over the left leg with the right leg", he says. He expected the swim to take about 16 hours, but "my guardian angel must have been looking after me that day." He swims for about two hours every day of his life.

Captain Webb wasn't the only one!

(Associated Press Photograph)

### BABY DAUGHTER

**Bingham:** Sheila (née Lead), past Secretary of Nottingham '62 Club, and David have pleasure in announcing the birth of their daughter, Sylvia Joy, on 3rd August, 1964.

### ARCHERY AT SHERRARDS



Not long ago, the Howard Bowmen Archery Club, whose headquarters is in Welwyn Garden City, very kindly went along to Sherrards to give the trainees a demonstration and tuition in the art of archery. Sherrards may take up this recreation.

Our picture shows Shirley Thomas firing her arrow, watched by David Wise, Morton Sutherland and George Norwood, who are all now in employment.

A new and different project . . .

# An Agricultural Work Centre

by *S. G. Hayden, Technical Assistant to the Society's  
Industrial Centres Secretary, Col. Jefferson*

"GET the fatstock prices from the radio," the boss says. "Yes," says I, and dutifully tape them at 6.40 in the morning. "Not one," says he, "that's no good. We need several before we can analyse". So I stumble on, and when I've got it I can't understand it!

What is all this about, you say?

Well, Thorngrove, or Queen's Manor, it was originally called, is near Gillingham in Dorset, which is on the main line to the west country from Waterloo and 105 miles from London. This beautiful old house in 39 acres of grassland has been bought by the Society to provide its first Agricultural Work Centre.

The house was used for some years as a home for children by Dr. Barnardo's organisation. It stands on three floors and has numerous outbuildings which will be put to good use, one being the work shop. The house is fully centrally heated and looks as though it will be a very

they are about 28 weeks old—fed properly these little fellows reach 200 lbs in 200 days.

It is also planned to buy at the outset 24 four-week-old bull or heifer calves and fatten them up until they are about a year old and then sell them as beef or veal. Some will be kept to supplement our herd of cows. Later our own cows will produce our babies.

In addition we shall, of course, keep hens—initially about 50 of them—to provide eggs for the hostel. Later we may enlarge the flock and sell off the surplus eggs to the local packing station or private buyers. The hens will be free-running and not kept in batteries.

We shall also rear three-day-old chicks into healthy hens to replace our original flock, whose egg productivity falls off after about a year's laying. Sadly we shall sell or deliver the retired hens into the hands of the hostel cook. However, I expect some favourites will live to a ripe old age in spite of farm economics.

The preparation of the estimated income and expenditure budget for the financial year 1964-5, presented some interesting and original problems to our staff who so far have dealt with the costs of looking after spastic residents only. Some remarkable entries will be seen in the budget such as under "Cost of food for Staff" the phrase "Residential working dog" 52 staff resident weeks at 10s. for each week = £26 0s. 0d. The Accounts Department is now dealing morosely with the dog's P.A.Y.E. and pension rights. That reminds me—I've forgotten the cost of the dog licence!

You will now realise why I am losing so much sleep over listening to the fatstock prices.

On top of looking after all these animals there will be ten acres of kitchen garden to attend to and in season the usual chores of hedging and ditching, etc. During winter months, the workshop will be in use, where such things as seed boxes, wrapped flower pots, packing materials and other items required by the nursery world, will be made.

The girls will be mainly occupied with domestic duties, which in a house of this size will be considerable, and they will be under the guidance of an instructress. They will also look after the hens and rear the three-day-old chicks into healthy egg-laying hens.

Farm equipment is going to be a problem. **If any of you know of a second-hand tractor in going order, and other part-worn farm equipment such as trailers, we should be pleased to hear from you.**



*The main entrance of the new centre*

comfortable place to live in. The people living here will be some 27 men and eight girls whose range of disability will be rather wide and whose ages will not be limited.

We shall have a herd of 18 cows—probably Friesians—and we hope they will each produce some 800 gallons of milk a year which will bring in an income of about £2,000 a year. To achieve this we shall have to watch out that the residents do not drink up all our profits!

The Centre will buy 36 eight-week-old piglets which will be weaned and fattened up for sale as bacon or pork when

Gillingham, a town of approximately 3,000 people, is not far away, down a pleasant country lane. It has a cinema and a variety of pubs. Near this lane was found Roman British pottery, which indicates the age of the town. There was, indeed, a Royal hunting forest and palace hereabouts, but the forest has long since been cut down, leaving very rich grazing land, and the palace fell into disuse.

Gillingham is on the River Stour, which nearby is joined by the Shreem water and River Lodden, where there is excellent fishing.

There are local clubs for cricket, football, tennis and bowls, and there is a local recreation ground complete with games pitches. There are also local hunts.

Dances, whist drives, socials and entertainments are held in the local halls where facilities are also provided for billiards, badminton, and other indoor recreations. There is also a branch of the county library in the town.

So far as churches are concerned the town is well represented, with Church of England, Roman Catholic, Baptist and Methodist churches.

It is a centre for local industry, and agriculture is the most important, with Gillingham as the market centre. Secondary industries are flour milling, brewing, bacon curing, glove making, timber work and the manufacture of bricks, tiles, pottery and terra cotta goods.

Bus routes link Gillingham with Shaftesbury (4 miles), Mere (4 miles), Wincanton (7 miles) and other surrounding towns.



Queen's Manor from the back

*This must be the most exciting agricultural article since Mark Twain got on to the Milwaukee Journal as its farming correspondent and advised potato growers never to shake the vine. Having read its engaging propositions, with the cows having babies and all, the Editor (of farming stock) has just enough strength left for one faint but heart-felt appeal. Please, please will some kind farmer-parent help these two engineers plan their agricultural centre? They're engineers, you see. It works well for setting up training centres as a rule . . .*



*Roger Daniel of Liskeard is already an experienced farmer, and has a special knack with farm machinery. Roger works on his father's farm near the Cornish coast: soon other young men like him will have the chance to make his choice of a career*

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## PARENTS' HANDBOOKS

**A new series to be published**

**A**T the present time the only handbook for parents of spastic children is the small one originally published by the British Council for the Welfare of Spastics in 1949, revised in 1958 and now out of print,

Because the Society feels that parents need much more help and advice on the day-to-day care and management of their children, we have decided to publish a completely new series of handbooks. Three or perhaps four of these handbooks will deal with the general problems that all parents of cerebrally palsied children have to cope with. The first will cover problems likely to arise during the child's first four years, the second will deal with problems cropping up between the ages of 5 and 11, and others will give advice on the management of the different types of cerebral palsy as well as on the special problems of spastics who also have defective speech, sight or hearing, or are mentally handicapped, or suffer from fits.

When the series is complete in about two years time there will be about ten booklets. The first to be printed will be specially for parents whose children suffer from spastic hemiplegia. It will be called "The Hemiplegic Child", will cost 2s. 6d., and will be ready by the middle of October. Before the end of the year the first of the General Handbooks will be available. This will be for the parents of spastic children under the age of five years.

J.H.B.

# HOPEFULNESS



# IS



# THE

by James R. Carlisle, M.F.PH., S.R.PH.,

Group Senior Physiotherapist,  
Little Plumstead Hospital,  
Norwich.

IN the past, the child who had a severe mental and physical handicap was merely segregated and treated as a social outcast, someone to be shut up in an institution and forgotten about. This attitude is still not uncommon and would seem to be due to the view held by some that, when a spastic is severely mentally handicapped, special effort and treatment are pointless. A fog of superstition and a feeling of guilt seem to be stifling the approach to rational thinking and treatment. However, something positive can be done in hospitals for the mentally subnormal, as a visit to Little Plumstead will dramatically show.

Let me take you around our village—I prefer to think of our community as a village rather than a hospital. Like English villages everywhere our population revolves round the church, the hall, the school, and the social club. The modern school building houses a "design for living" unit, and facilities for daily adult education classes, as well as the more conventional education for our children. There is a cinema held in the multi-purpose, modern hall, and unlike cinemas elsewhere it is always full. We have shops, hairdressing salons, social clubs, and other entertainments.

Cricket and football teams are turned out according to the season, and each villa where the patients live has television sets, radios, and record players. In addition there are specialist medical facilities, occupational therapy departments, and training units.

## The Story of Ann

Pioneering physiotherapy commenced in April, 1962, and a nucleus of fourteen patients were selected for treatment. Among them was a teenage girl whom we will call Ann. To meet her you would have taken her to be about nine years of age. Her mental "age" was about three. A cursory glance would have made you realise, as she looked up at you from the floor with sad and frightened eyes, that Ann was a spastic with both legs severely crippled and deformed. If I had told you that, at fourteen, she had never walked and was unable to bear her own weight because her knees could not be straightened beyond ninety degrees, would you have been surprised? depressed? shocked? or perhaps, concerned?

Let me take you into the same villa today and meet Ann, as it were, for a second time. No! Don't look to the floor but almost straight ahead. A smiling, happy face greets you as Ann walks towards you pushing her wheelchair. Her legs are now straight and she looks more like the fifteen-year-old that she is. As yet she only walks a few yards at a time, but considering that she has never walked before this, to Ann, is a major achievement. The



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## FOR AND AGAINST

by G

PROFESSIONAL sport is such a regular feature that it is difficult to think of life without it. As one takes it so much for granted it requires thought to weigh up the pros and cons.

Take the arguments for, first. Under professionalism the top players will be attracted into the various sports. It is good to have top professionals playing, as the public will probably try to emulate their heroes, after watching them. Amateur sport may exclude the best players. A case in point is the Wimbledon lawn tennis championships where some finalists turn professional. Since it is an amateur tournament they are therefore barred from competing again, and pressure for an open tournament has been growing during the last few years. The state of Australian cricket, where all players are amateurs, has shown that they retire quite early for business reasons.

Another argument for professional sport is that the play is keener. It has been shown by certain cricket festival matches that intelligent players and critics are merely alienated by knock-about play where no points are involved.

The Marylebone Cricket Club now call all cricketers professionals. There would appear to be two arguments in favour of this. The first is that the distinction between

# KEYNOTE

rest of the time she flies around the place in her self-propelling chair. She is now almost completely independent and can dress and undress herself; get off and on her chair; go to bed by herself; and go to the toilet and back without assistance. She attends school daily and is much more sociable than formerly.

Is this a hopeless, helpless, useless, mentally subnormal spastic? I think not! It is just one example of what is being done. Apart from Ann, there are another six children aged from seven to fifteen, who are now walking or learning to walk for the first time.

## Integration of Treatment and Training

The treatment schedules were designed to suit each individual patient and to cover the twenty-four hours of the day, and not only the short period of daily specialised treatment. This treatment is also co-ordinated into the general and specific education, training, and social rehabilitation of the patient. Merely taking care of our spastics is not enough; positioning them is better but still not good enough. Active physical treatment and rehabilitation, including the correct positioning and handling, is the answer. How the patient lies, sits, or stands is important. How he is supported in standing and lifting, in fact at all times, is also very relevant. To make this a practical proposition much emphasis has been placed on educating the nursing staff to co-operate intelligently, particularly in the positioning, handling, and night-splinting of the physi-



Ann walking between parallel bars in the Physiotherapy Department

## PROFESSIONAL SPORT

### Knights

amateurs and professionals has led to snobbery. It is only the last few years (less than fifteen, in fact) that amateur county captains have been accepted. The second is that not all amateurs are amateurs in the true sense of the word.

When one turns to the arguments against professional sport the one that springs quickly to mind is bribery. This applies to football and unfortunately debases the individual as well as the game. Another general argument against is the fact that sensationalism and slang reporting get in the newspapers. This also applies chiefly to football. Fortunately this is not true of quality daily and Sunday newspapers, who all have some correspondents who are ex-sportsmen. Experts of the same sort work for the British Broadcasting Corporation.

As far as the individual professional sportsman is concerned there would appear to be two arguments against him. The first is that it is not a very secure job. If he fails to make the grade, or is suddenly dismissed, it may be too late for an apprenticeship. The second argument against is that he could be using his intelligence to better effect.

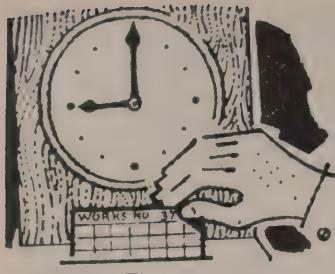
The arguments for and against professional sport may be said to be evenly balanced. However, since it adds so much colour to life it should surely be kept.

ally handicapped patient, and not only the spastics undergoing the specialist treatment. This in itself is a major breakthrough from the old idea that the mental deficiency nurse is a keeper just caring for the patients. No longer is it good enough to have a severely mentally subnormal spastic lying in bed deteriorating and vegetating.

### Modernised Method

We are also endeavouring to bring our "wheel chair brigade" up to date. In 1962 there were only four wheelchairs in the whole hospital, and most of the physically handicapped patients never moved outside their villas. The simple pleasures of a country walk, or the cinema, were closed books to them. To-day there are 20 chairs and it is hoped to double this number within the year. In addition, another 33 patients have been fitted with special footwear and surgical appliances in the past year. This other aspect of the work will also be brought up to date this year.

I have tried to portray something of the work being done here with mentally subnormal spastics. I hope I have shown that pioneering physiotherapeutic work continues to progress, bringing with it fresh hope and a better future for our children. Apart from the more obvious physical improvements, the patients having treatment are more active; less of a social and management problem; and are much happier. Let us, therefore, relegate the old ideas and superstitions which have surrounded the "Idiot", the "Imbecile", and the "Mental Deficient" spastic into the buried past where they belong, and stride forward confidently into the future with the realisation that something positive can be done for our severely subnormal spastic.



## SPASTICS AT WORK

**Margaret Anderson** from Stalybridge who trained at the Chester Office Training Centre is doing typing, filing and duplicating work for a firm in Stockport.

**Mrs. Audrey Audsley** from New Ferry is working part-time as a hand-packer for a firm in Birkenhead.

**Pamela Chapman** from Gorleston-on-Sea has completed satisfactorily a trial period of employment in a factory in Great Yarmouth. She is now doing assembly work there on a permanent basis.

**Christine Davies** from Sheffield who trained at the Chester Office Training Centre, has commenced employment for a firm in Sheffield—her work consists of filing and typing and other jobs.

**Christine Fitze** from Calstock who trained at the Chester Office Training Centre, is working as a filing clerk for a firm in Plymouth.

**Peter Fortune** from London has changed his job and is now employed as a gardener by St. Pancras Borough Council.

**Victor Gable** from Homerton has changed his work and is employed on a trial basis as an auxiliary trainee in screen printing by a firm in Bow.

**Barbara Gornall** from Penrith who trained at the Chester Office Training Centre, has a new job and is now working at the local egg-packing station.

**Helen Keeney** from Clapton who trained at the Chester Office Training Centre, has new employment as an addressograph operator in Oxford Street, London, W.1.

**Susan Makin** from Bolton is working for the Co-Operative Society in Manchester.

**James Mist** from London has a new job as a lift attendant with the Ministry of Public Buildings and Works.

**Lorraine Passby** from Goring-on-Sea who trained at Sherrards has changed her job and is working for a firm of clothing manufacturers in Worthing.

**Edward Pelling** from Roydon who attended a recent Assessment Course, is working for a firm in Hoddesdon whilst awaiting a vacancy at Sherrards. He is employed on inspection duties.

**Archibald Savage** from Glasgow has returned there after working in London, and is employed as a trucker in a Clydeside shipyard.

**Elizabeth Weymouth** from Grays has recently commenced work with a local firm.

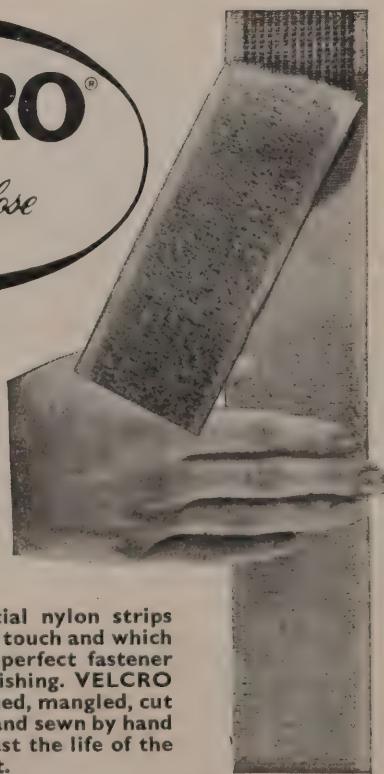
**David Whittaker** from Blackpool, has changed his job and is now employed as a technical librarian in the U.K. Atomic Energy Authority, near Preston.

**David Wise** from London, who trained at Sherrards is employed as a machinist in the milling section of a motor-cycle manufacturing concern.

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R.O. ←  
**EAST**  
**MIDLANDS**

**M**MR. PETER LINDSELL has been appointed Regional Officer for the East Midlands. He was educated at Uppingham School and is an arts graduate of Cambridge University. After taking a post-graduate course, he was appointed an Administrative Officer (Colonial Administrative Service) and posted to the Gold Coast in 1939. During his service in that Territory he served for three years in the Ministry of Education and Social Welfare. In 1957 he was posted to Northern Rhodesia in a similar capacity. Mr. Lindsell's duties, both in the Gold Coast and Northern Rhodesia included close and harmonious working with professional and technical officers of Government, Central and Local, and with the various voluntary organisations operating in those Territories. He is 47 years of age, is married and has two children.



→ D.R.O.  
**NORTH**  
**WEST**

**M**MR. F. YOUNG has been appointed Deputy Regional Officer for the North West, looking after North Wales and Cheshire up to Liverpool.

Mr. Young is a native of Liverpool and was educated there, apart from a time spent in North Wales, which enabled him to get to know the people of that area. On leaving school he propped up a desk for the Liverpool Corporation Transport Department and after a spell of National Service he trained in nursing at General and Psychiatric hospitals.

He embarked upon social work as a Mental Welfare Officer, in Warrington and subsequently became Senior Mental Officer at Solihull, where as well as the mental health services he administered the Local Authority Services to the physically handicapped, including the spastics of the town. From there he joined the Society.

Mr. Young is married and has three children.

# NEW IN THE REGIONS



→ R.O.  
**WEST**  
**MIDLANDS**

**F**ORTY-FOUR-YEAR-OLD Mr. Ian Archibald has been appointed Regional Officer for the West Midlands.

He was educated at Greenock Academy, and as a boy was representative Scout for Scotland, a King's Scout and Troop Leader of the 85th Renfrewshire (Inverkip) Sea Scouts.

Joining the Highland Light Infantry in 1939, he served in France in 1940, and became a regimental sergeant-major at the age of 23. He spent the later war years in East Africa and Mauritius as a staff captain.

He served in the Malayan Police during that country's Emergency, mainly in the intelligence branch, having qualified with distinction in Chinese language early in his career. While in Malaya he took part in voluntary work for orphan boys. For his services as a superintendent of police he was awarded the Sultan of Jahore's Medal.

In more recent years he has been in Nyasaland and Tanganyika for the Department of Technical Co-operation, where his duties included responsibility for training Special Constabulary and Youth League personnel.

He is married and has three sons.

## SPECIAL EDUCATION CONFERENCE

**T**HE National Biennial Conference of the Association for Special Education (formerly the Special Schools Association) was held at the Cardiff Training College from August 26 to 29, and was attended by approximately 500 delegates.

The opening paper was given by Miss Norah Gibbs, a Consultant Psychologist, whose interest in the problem of cerebral palsied children is well known and who is a member of the Society's Educational Advisory Committee. Mr. J. A. Loring, the Society's Assistant Director (Services) took the Chair at those sessions of the Conference which dealt with the problems of physically handicapped children.

A Conference Report will be published in due course and details of where and how to obtain this will be given in the SPASTICS NEWS.

# Hospital School

by David Akers

WHEN a scholar enters hospital it is assumed that his education will be neglected.

Probably in some cases this is true, because although education authorities provide visiting teachers, it is impossible for these to attend a hospital more than two or three half-days a week.

But there is no such problem at Winford Orthopaedic Hospital near Bristol. Here, under the headmastership of Mr. Harry Morgan, a permanent staff of highly qualified teachers maintain a normal school programme on three wards. There are two teachers for each ward.

Frequently patients who are studying for national examinations enter one of the two senior wards. Here, they can continue their studies, because besides general teaching, each teacher specialises in certain subjects. There is also a schoolroom where candidates who are mobile are coached.

Examinations ranging from Eleven Plus to G.C.E. are taken at Winford, and the many successes are proof of the excellent educational standard.

At 15 I became a pupil in the senior class on the boys' ward. I did not imagine then that when I left two years later I would own two certificates in English Language.

## Chance to Catch Up

Until I went to Winford I thought examinations were beyond me. I am a spastic, and my school career began with home tuition when I was nine. Later, my parents and I moved to Bristol, and at the age of twelve I attended my first school—one for the physically handicapped. But my education made little progress as it was interrupted several times a week by my visits to a local hospital for treatment. Winford gave me the belated opportunity to improve my general education and exploit my flair for English.

## Treatment and Lessons Fitted Together

During my stay at Winford I noticed how co-operation between hospital staff and teachers enabled both to continue their work smoothly and efficiently. One way in which this co-operation is shown is when pupils become ready for physiotherapy. As far as they can, the physiotherapists try to fit this in out of school hours, but naturally it is not always possible. However, when physiotherapy does encroach upon school time, the teachers readily release scholars for their necessary treatment.

It was impressive, too, how the combined ingenuity and determination of pupil and teacher overcame difficulties incurred by tractions, plasters, plaster beds, jackets, and many other medical impediments.

The official school day is from 9.30 to 3.40, with a break for dinner, but for examination students personal study may continue long after hours—frequently until "lights out" at 9 p.m.



Mr. Morgan and David discussing a lesson

After I had recovered from two operations, my parents and Mr. Morgan discussed the possibility of entering me for the G.C.E. in English Language.

When he had tested me in this subject, Mr. Morgan tentatively decided that with hard work and co-operation from both sides, I would be ready for the November 1962 examination. So months of studying began.

My first impression of Mr. Morgan was blurred by the awe in which I held him. He would come to the ward for the weekly Geometry period, and when necessary, to coach examination students in English and French. My first attempts at Geometry had Mr. Morgan remarking that he did not quite know whether the compass I was endeavouring to use was likely to injure HIM or the paper. I was uncertain how to take such remarks, but later grew to accept them as part of his subtle, slightly ironic humour, and to recognise him for the essentially kind man that he is.

As my English tuition with Mr. Morgan progressed, he included play readings from Shakespeare, and I like to think that the enjoyment derived from these was mutual. I realise now the patience and time Mr. Morgan expended to help me prepare for my exams and I am grateful, and count him as a friend.

Often though, as I wrote the last line of the umpteenth competition, or tackled the latest batch of grammar exercises, I thought I was overworked! Indeed, I was not the only pupil with this opinion. During my period at Winford I knew several students who considered Winford teachers were inclined to "pile on the pressure".

A friend of mine who was studying for the G.C.E. a year previous to me was a classic example of the hard-done-to pupil. He calmly decided to go on strike, and informed Mr. Morgan and the rest of the teachers that he had no intention of taking the examination while in hospital! Fortunately, reason prevailed and he did take several subjects at Winford, and was successful.

## Trials of a Trial Run

I had been studying for approximately two months when Mr. Morgan dropped his bombshell. I was entered for the College of Preceptors examination, barely six weeks away, as a "preliminary canter"!

My nervous system galloped. I could forget about the six months' grace to the G.C.E. and concentrate even more on the mound of work I knew would now grow! To complicate matters, I had obtained permission to join my parents on a summer holiday towards the end of June, the very month of the exam.

We hoped that the dates would not clash, but it transpired that I had to interrupt my holiday and return to Winford for the occasion. I assure you that I had examination day nerves, and these were not improved by Mr. Morgan's greeting. In a voice of doom he quoted: "There comes a tide in the affairs of man which taken at the flood leads on to fortune." However, this tide carried me to success as I heard three months later when the results came through. After hearing about and knowing many successful examination candidates, it felt great to be one myself.

By then the G.C.E. date was drawing near, and my first success somehow made it all the more important that I should succeed again.

The remaining two months were the most hectic. I crammed so much work into them that I was certain I would have a mental black-out on the day. During the exam itself I was equally sure that I hadn't a chance of success. The précis was hard labour, and I considered I had not given it my best. Mr. Morgan had stressed that

the précis was the "mark-getter", so this undoubtedly would be my downfall.

However, my fears were unfounded, because I completed the examination paper, and learnt three months later that I had gained my English certificate.

Meanwhile my discharge was imminent. Although after two years hospitalization the thought of discharge was wonderful; I found it strange to contemplate life without the hospital.

## Christmas in Hospital

I left Winford in good time for Christmas, but for the boys less fortunate, every effort was being made to ensure that theirs was a happy holiday too. Having already decided what theme the wards' decorations would take, the teachers and pupils were hard at work designing and making these before the term ended.

That year the décor was based on "The Black and White Minstrel Show". "Boaters" and Minstrel masks were made for the patients and nurses to wear on Christmas Day; music notes and banjos were suspended from the ceiling, and the big white lampshades were transformed into Minstrel faces.

It was obvious from the artistry and ingenuity displayed during the preparations that the finished product would be breathtaking.

Pupils continue to enter Winford, and no doubt many of them speculate on how their education will be affected. From my own experience I can reassure them.

Thanks to Mr. Morgan and his staff minds do not deteriorate at Winford; they are stimulated and enriched.



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FOR THE  
DISABLED

H/4 LIST

HOME DEPARTMENT

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LONDON, S.W.1

March 1963

# PRACTICAL AIDS FOR THE DISABLED

## *Our Appliance Officer's Review*

THIS book, just published, is made up of a number of do-it-yourself aids that the British Red Cross have found practical over many years. I can recommend this for those who find it easy to make things with their hands. Most of these suggestions require only the simplest form of carpentry with the usual tools one finds about the house.

Among the aids for dressing you can learn how to make a long-handled lipstick holder, powder puff or comb, a stocking puller-on and a dressing aid. **In the bathroom:** two tap-turning attachments for those who don't want to install costly long-levered taps; the use that suction caps can be put to in the bathroom; a soap and sponge-holder, and a washing aid. **In the kitchen:** various simple lid-holders, fruit and vegetable peeler and two potato-holders for the one armed. **In the dining-room:** various holding attachments that can be fitted to cutlery, the uses of foam rubber, an egg stand and two drinking aids. Under the heading, **Leisure Hours**, there are twenty-eight suggestions

ranging from the use of clothes pegs as an aid to turning pages, to a spelling board which would take a competent do-it-yourselfer several hours to make.

On the whole, although there are some things in this book which I feel won't ever get made, these are quite outnumbered by simple suggestions for aids—many of which may be made by a couple of screws and a piece of wood—which without this book might never have been brought to your attention. The forty-seven-page booklet with sixty aids, well illustrated by Miss Shirley Roberts and with competent instructions, can be bought from The British Red Cross, 14 Grosvenor Crescent, W.1., for 7s., plus postage 6d.

I would also suggest at the same time you order The British Red Cross's "Aids for the Disabled" H/4 List for 9d., including postage, which gives you the name, description and supplier of some 350 other aids that might be helpful. Same address as above.

## READERS' QUERIES ANSWERED

### Extra Driving Tuition

Dear Sir,

I am fortunate enough to have been issued with a blue Inva-car. Four months ago I completed my course of driving instruction with the man from the Ministry, but since then I have been in hospital. I now find, no doubt through lack of practice, that I am nervous of driving on the busy roads around my home.

Could the Society advise me on how to go about obtaining more instruction?

Nicola Lewes,  
S.W.1.

Dear Nicola,

You should immediately contact your local Ministry of Health Appliance Centre Manager who issued you with the motor-tricycle, and who will probably give you another three-hour

period of instruction. They may, however arrange for you to have instruction on an enclosed circuit with The Institute of Advanced Motorists, who volunteer their services. This is I believe local to Liverpool, Manchester and Croydon areas. On the other hand if you only require confidence the Appliance Centre may put you in touch with the Disabled Drivers' Association or (in areas where there are no local groups) the Red Cross who will arrange to help you. If for some reason these fail please contact me again as we have the use of a specially strengthened motor-tricycle that can carry the instructor and learner on the highway without breaking the law.

This motor-tricycle is housed in London, N.W.1., so would be suitable for you should you have need of it.

The Appliance Officer.



*"Thank you, sir. Third ticket I've sold since the trains stopped halting here. All the money goes to the Spastics Society"*

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# Letters to the Editor

## LETTER TO MRS. SCOTT, WARDEN OF EASTCOTE FOSTER HOME

Dear Sir,

Enclosed, you will find a cheque for £1 19s. 6d., which is the amount that we collected at a concert, given at my house by our "Secret Society" of ten-year-olds, on Saturday. We hope that you will accept this small gift for your home.

Yours sincerely,  
Linda Goldberg,  
55 Wemborough Road,  
Stanmore,  
Middlesex,

on behalf of Amanda Smith, Patricia Kilbey, Lindsey Evans, Kathryn Hull, Laura Lewisohn, and Helen Cull, who are members of "Secret Society".

## LITTLE THINGS MEAN SO MUCH

Dear Spastics Society,

We have had a puppet show for you and we have earned 5s. for the spastics. We have sold ornaments, which were 3d. each. Two kind ladies and Auntie Dorothy and Mrs. Edwards paid a shilling admission instead of a penny. A lady called Auntie Sheila paid 6d. for an ornament instead of 3d. Edward Bird won 1st and 2nd prize in a raffle which was a penny. Mrs. Edwards told us a story about Jesus, which was a short story but good.

Yours faithfully and truly,

David King and Trevor Thomas,  
Hanwell, W.7.

## YEAR'S INCOME TO US

Dear Editor,

We enclose Postal Orders to the value of £7, which we raised by holding a bazaar, a raffle, by picking and selling blackberries, and carol singing. We would like to donate this sum to the National Spastics Society.

Yours truly,

Mary Briggs, 12 yrs.  
Christine Gilbert, 11 yrs.  
Margaret James, 11 yrs.  
Gillian Kerslake, 12 yrs.  
Carol Woodley, 8 yrs.  
Susan Woodley, 12 yrs.  
Finchley, London, N.3.

## SUPER HOLIDAY

Dear Editor,

I have just spent my first holiday at "The Bedfont", Clacton, and what a super holiday it was.

I would like to express the thanks of my fellow residents at the Buxton Centre, and myself to Mrs. Molyneaux and her staff for making this possible.

Needless to say we have all booked again for next year.

Richard Wolff.

## "HOUSEPARENTS"— A MISNOMER?

Dear Editor,

Houseparents in adult centres are employed to help with the personal needs of the residents and generally to contribute to the life of the community.

But is the term "Houseparent" really appropriate for people working with adults? Surely the relationship between resident and "houseparent" is not to be compared with that of parent and child?

Ponds has "house companions". Is this a better name? Perhaps your readers have other ideas or suggestions.

E. T. Udall,  
Buxton.

## A SATISFIED CUSTOMER

Dear Editor,

I bless the day I went to Sherrards Training Centre for Spastics.

I had spent most of my time on the smallholding my parents had, helping where I could in rearing pigs and poultry and collecting eggs to sell at the door.

I was always interested in mechanical things and engineering and my father insisted that we try and get some training in this particular field. When the opportunity of Sherrards came we took it gratefully.

Although very dubious at first, leaving home (I was very homesick), I soon began to settle into the life at Sherrards and altogether spent a very happy 15 months there. I cannot speak too highly of the kindness and helpfulness I met from all the staff.

One must realise there are rules to keep and I always made up my mind to learn all I could.

Today I have a job with a very large engineering firm and an extremely grateful to Sherrards in helping to fit me into a position where I can earn my own living and be a useful citizen.

Some of the staff where I work were surprised to find I can read a micrometer. This was one of the many things I learnt to do at Sherrards.

Brian Fletcher,  
Lane End,  
Nr. Camberley.

## SHIRT COLLAR ANSWER

Dear Editor,

I see that one of your writers in the August edition of the SPASTICS NEWS would like some advice to help him to do up the top button of his shirts by himself. Well now, I used to have the same difficulty years ago, but I discovered that I could always manage it when it was a shirt with a stud in front. So I got mother to cut the top button off and make a button hole in its place, and from then on I've been able to do it quite easily as the stud doesn't turn over like a button does.

Another thing I've found a great help is to have my shirt sleeves cut off just above the elbow, much better than having them rolled up or having to try and do up the button.

I hope these tips will be helpful to other spastics, especially John Wills.

S. Stillwell,  
Cheshire Home,  
Kington Langley,  
Wilts.

P.S.—I find a back stud is best if the collar band isn't too thick.

## VOTES FOR SPASTICS

Dear Editor,

During the current month, some fifty thousand adult spastics will visit the polling stations to vote for his or her choice as their M.P. during the next five years. I am writing this to give any prospective candidate who may happen to pick up this SPASTICS NEWS something to think about.

No local Disablement Resettlement Officer or the Spastics Society will be able to relax until all spastics, who are capable of satisfying employers, are placed in suitable employment.

In the May issue, Ernest Barnes's suggestion "One day we might have a Government of spastics, then the world

"would wake up!" would seem over-optimistic, as where is the £150 nomination fee coming from? As things are at the moment, few could afford this. I expect the respective party would have to be obliged to help, but why should they?

What I think is absurd is the fact that Work Centre Employees cannot earn the standard wage for the type of job they are performing, because the amount they can earn is limited by National Assistance regulations, and even those not eligible for National Assistance are not allowed to earn any more.

Christopher J. Hills,  
Abbots Langley, Herts.

### IMPORTANT POINT MISSED

Dear Editor,

I think your article on the Independence Camp (August issue) was a little misleading.

The preparation and planning looked after a lot of trouble in advance, and a fully confident spastic catering staff took care of a lot more. Contrary to many opinions, most of the campers were quite able to look after *themselves*. The questions were, could they adapt to camp life and could they look after each other?

This one uncertain factor must have caused the organisers quite considerable worry, but even in atrocious weather all the campers not only survived but actually enjoyed their holiday. Why?

The answer is quite simple. Spastics who in everyday life are continually fighting to be normal, suddenly found that there was no need to be normal. It is easy for me to illustrate this as I am an athetoid and given to throwing cups of tea all over the place. But after three days at the camp I did not spill my tea, and I was in fact serving other people! This is I think the crux of the problem. How do you make a spastic believe that it does not matter that he or she is a spastic?

The camp did not make the spastics forget their disabilities. It helped to make them realise that it did not matter that they were spastic, and that they could enjoy many things that they had not previously thought possible.

I'd like to make a suggestion for coming camps. Would it not be possible, in addition to activities such as riding and boating, to arrange field studies in such subjects as biology and botany? Surrey is such a wonderful

county for these subjects. Perhaps local teachers would be interested in taking parties into the woods, and could show the many interesting plants and creatures that those who don't know of such things overlook.

Roland A. Sherratt,  
Chorlton-cum-Hardy,  
Manchester 21.

### TYPE WITH ONE HAND

by

Nina K. Richardson

This useful American instruction book, which we send out from the SPASTICS NEWS Office on three-monthly free loans, has now been returned to us by the last person on our waiting list. If anyone else would like to borrow it, would they write to the Editor?

### NEWS FROM PONDS

Dear Editor,

The first item of interest is a conference for handicapped people which Beryl Potter attended in Gottenburg, in Sweden, representing "Ponds" together with Michael and Margaret Eppstein who used to be here. Beryl stayed on one month in Sweden in exchange for a Swedish teacher from Stockholm, named Marianne Lindquist who is here at "Ponds".

While Marianne is here, she is going to see some of the beauty spots in England; for example, Windsor and Oxford. She is also visiting Ingfield Manor School.

Two of the scouts from Ponds went with a big handicapped troop from London, called the Agoonoree, to Norfolk for a week's camping under canvas. They enjoyed it very much.

During the holidays, two members of the family, Anita and Mona, went to spend a fortnight of their vacation in Jersey, at the invitation of the Jersey Spastics Society. During their stay, they saw the carnival "Battle of the Flowers", which they enjoyed very much.

Now an item which interests me particularly. On 25th August, twelve staff and Marianne (from Sweden) went to Stoke Manderville Hospital to see the "Possum" equipment and to discuss how many of the family would benefit from it.

I hope you have enjoyed this bulletin.  
Linton Edwards

### APPEALS & PEOPLE

Dear Editor,

I was very interested in the observations of my late co-habitant of Prested Hall, under the heading "Methods of Appeal" (August issue). I do not agree with the placard he saw neither do I agree with his suggestions. Neither do I agree that spastics are always happy, obviously we are the same as any other race or species. Some of us are miserable when we appear to be happy, and others, like myself, are only happy when thoroughly miserable.

By far the best method of winning the goodwill of the public is for us to be ourselves, and to get out among the public without escorts at carnivals, fêtes and what-have-you, and to fall off trains and buses.

God bless all the people who work for our appeals, but how humiliating to be compared with a broken daffodil. I would suggest a placard for our respected Editor, if she dares to publish this: "Prepare to meet thy doom".

Ernest Barnes,  
Prested Hall.

*The Editor is always prepared to face a certain amount of doom when publishing Prested.*

*Races and species do have special characteristics, after all, and why wouldn't spastics? Happier or not in fact, you are happier in effect, as a people, than the unhandicapped or other handicaps are. More original, with some special kinds of wisdom, more courageous and less tough, and a whole lot more exasperating generally . . .*

*Didn't you know you look like a daffodil, love?*

### PEN FRIEND WANTED

Dear Editor,

It has been suggested to me that I write to you, to see if you know of a lonely spastic boy friend I could write to.

I only want a friend, nothing more. I have three girl pen-friends, but I would like someone about my own age, 34. I am slightly spastic and would so much like someone I could knit socks or gloves for, and feel I was helping to make someone happier as well as me. I am a Nonconformist and live at home. I like animals, Bible study, photography, reading and handcrafts. I would prefer a Christian friend.

B. M. Cooper,  
1 Princes Street,  
Taunton, Somerset.



## THE NARROW SHORE

by Louis Batts

Secker & Warburg Ltd 21s.

*Reviewed by Anne Plummer*

THIS sensitive yet thoroughly masculine novel was written by a spastic author who has already published several previous works. Narrated in the first person, it tells of Jack Umpleby, a 28-year-old polio victim who is fascinated by a beautiful young woman he meets while visiting a garage for repairs to his invalid car. The novel goes on to describe this developing relationship and its effect on Jack's life.

Although slightly egocentric, the hero-narrator is a completely sympathetic character. He has a strong sense of humour and healthy ideas about gorgeous blondes. Highly intelligent, he finds expression for his deepest feelings by playing modern jazz on the alto saxophone.

The story moves along at a fast pace

with interesting flashbacks to childhood and adolescence. Secondary characters are extremely well-drawn. Dominating the scene is Freda, strikingly beautiful but no mere dumb blonde, with her kindly but rather dull husband a more shadowy background figure. At the Invalid Tricycle Club we meet Keith, gallantly fighting his arthritis with a stream of bawdy humour and, by way of contrast, Stella with her false charm and "artistically" exaggerated limp.

Other minor characters are the dowdy Winnies next door, Nurse Pybus, a disturbing memory from Jack's teens, and Tony, the Rocker who came to grief trying to do a "ton" on his motor-bike. Members of Jack's family are rendered with affection and the other players in the jazz group with profes-

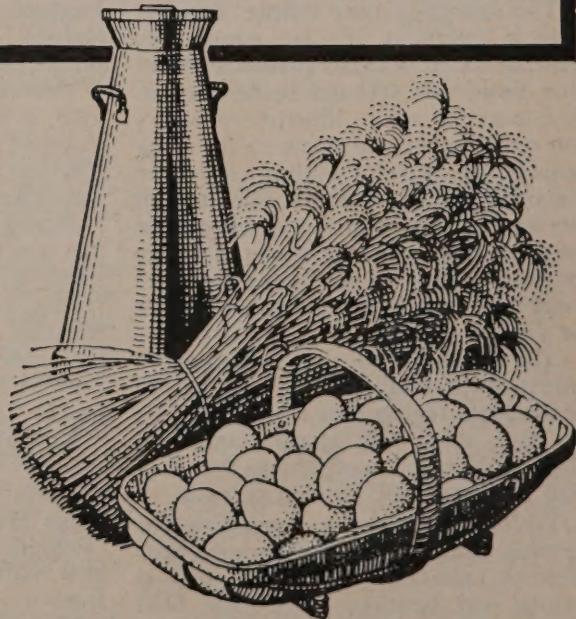
sional admiration. Two of these are also what he terms rather bitterly, "second-class subjects" though for reasons other than physical handicap.

The author conveys very well the ambivalent attitude of many disabled people towards other cripples and through Jack he puts into words the frustrations and yearnings felt by so many, yet seldom expressed so articulately. The life of a disabled person is likened to a tightrope, along which he must keep walking if he is to live life to the full. The only alternative (for Jack the unthinkable one) is that of becoming "institutionalised"—staring dully at the old gogglebox and wondering with invalid peevishness what somebody else will give you for your tea . . .

Towards the end of the book, Jack's own tightrope comes near to breaking and he is faced with the prospect of losing two of the things most precious to him, his alto sax. and his invalid car. However, driven back from even his "narrow shore" of his previous life, he refuses to give in. Although there is no conventionally happy ending, the final sentence resounds with a characteristic gesture of defiance.

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of a good thing



# AN IMPORTANT ANNOUNCEMENT

by

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